SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE

☐ **BANNING** 135 N. Alessandro Rd., Banning, CA 92220
☐ **BLYTHE** 265 N. Broadway, Blythe, CA 92225
☐ **RIVERSIDE** 4050 Main St., Riverside, CA 92501
☐ **HEMET** 880 N. State St., Hemet, CA 92543

☐ **INDIO** 46-200 Oasis St., Indio, CA 92201
☐ **MORENO VALLEY** 13800 Heacock St., Ste. D201, Moreno Valley, CA 92553
☐ **TEMECULA** 41002 County Center Dr., Ste. 100, Temecula, CA 92591

RI-ADR12

ATTORNEY OR PARTY WITHOUT ATTORNEY (*Name, State Bar Number and Address*)	*FOR COURT USE ONLY*
TELEPHONE NO: FAX NO. *(Optional)*: E-MAIL ADDRESS *(Optional)*: ATTORNEY FOR *(Name)*:	
PLAINTIFF/PETITIONER:	
DEFENDANT/RESPONDENT:	CASE NUMBER:

Proof of Service of Statement of Agreement/Nonagreement
By Mail, Fax, or Electronic Service

I, the undersigned, say: I am over the age of eighteen years and not a party to the within action or proceeding. My residence or business address is: _____

_____

On the _____ Day of _____ , I served a copy of the paper to which this proof of service by mail is attached, **STATEMENT OF AGREEMENT/NONAGREEMENT** as follows:

☐ By United States mail. I deposited said copy enclosed in a sealed envelope with postage hereon fully prepaid, in the United States Postal Service mail box at the City of: _____ , California, addressed as follows: _____

_____

☐ By fax transmission. Based on an agreement of the parties to accept service by fax transmission, I faxed the **Statement of Agreement/Nonagreement** to the persons listed at the fax numbers below. No error was reported by the fax machine that I used. A copy of the record of the fax transmission, which I printed out, is attached.

Names Fax	**Numbers**

The fax number from which I served the documents is (complete if service was by fax): _____

_____

**Proof of Service of Statement of
Agreement/Nonagreement
By Mail, Fax, or Electronic Service**

riverside.courts.ca.gov/localfrms/localfrms.shtml

PLAINTIFF:	CASE NUMBER:
DEFENDANT:	

☐ By electronic service. Based on an agreement of the parties to accept service by electronic transmission, I caused the documents to be sent to the persons at the electronic notification addresses listed below:

Names E-mail	Addresses

Date: _____

_____
(TYPE OR PRINT NAME)

_____
(SIGNATURE OF DECLARANT)

**Proof of Service of Statement of
Agreement/Nonagreement
by Mail, Fax, or Electronic Service**